Date

	MODIFIED PTO/SB/47 (07-0
"FEE ADDRESS" INDICATION FORM	
Address to: MAIL STOP M CORRESPONDENCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	
check the first box below and provide the Customer Number	Idress should be specified when the patentee would like a different address than the correspondence address for the ted with the fee address for the patent or allowed application, er in the space provided. If there is no Customer Number plication, you must check the second box below and attach a
Please recognize as the "Fee Address" under the provisions	of 37 CFR 1.363 the address associated with:
☑ Customer Number:	0.0 110
I	r & Co., LLC
	188
	er Number
OR	
☐ Request for Customer Number (PTO/SB/125) attached in the following listed application(s) for which the Issue Fe	
PATENT NUMBER	APPLICATION NUMBER
(if known)	
7,379,543	09/873,433
Completed by (check one):	
☐ Applicant/Inventor	/J. Warren Lytle, Jr./
	Signature
☑ Attorney or Agent of record 39,283	J. Warren Lytle, Jr.
(Reg. No.)	Typed or printed name
☐ Assignee of record of the entire interest. See 37 CFR 3.	71.
Statement under 37 CFR 3.73 (b) is enclosed. (Form	202 202 7040
PTO/SB/96)	202-293-7060  Requester's telephone number
	requester's telephone number
☐ Assignment recorded at Reel Frame	August 25, 2008

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more that one signature is required, see below\*.